

COMMUNITY HEALTHCHOICES (CHC)

OPERATIONS MEMORANDUM #2019-06

SUBJECT: Continuity of Services for Participants Transitioning to the CHC Waiver from Other Home and Community-Based Services (HCBS) Programs

TO: CHC-Managed Care Organizations (MCO)

FROM: Bureau of Coordinated and Integrated Services

DATE: December 11, 2019

PURPOSE

In accordance with Section V.C. of the CHC Agreement, CHC-MCOs must maintain continuity of services for Participants transitioning into CHC from other HCBS programs, so that they do not experience an interruption of services as they move to CHC. To ensure continuity of services, CHC-MCOs must obtain the current Person-Centered Service Plans (PCSPs) of transitioning Participants. This Operations Memorandum only applies to CHC Participant transitions that occur after CHC has been implemented in a zone. It does not apply to transitions occurring at CHC zone implementation or to transitions between the Living Independence for the Elderly (LIFE) Program and CHC.

PROCEDURES

Referring Participants

Participants who are receiving services under the following programs will go through the Independent Enrollment Broker (IEB) to enroll in CHC. If a Participant enrolled in one of these programs contacts the CHC-MCO directly, he or she should be referred to the IEB for an eligibility determination:

- Office of Developmental Programs (ODP) County Base Services (“MRX”)
- An ODP HCBS Waiver

- The Pennsylvania Department of Aging OPTIONS Program
- Early and Periodic Screening, Diagnostic and Treatment (EPSDT)

Participants who are receiving services under the following programs will receive choice counseling only through the IEB to support their selection of a CHC-MCO plan. If a Participant enrolled in one of these programs contacts the CHC-MCO directly, the CHC-MCO will refer the Participant to his or her Fee-for-Service (FFS) Service Coordinator (SC). The FFS SC will coordinate the Participant's transfer to CHC:

- The Act 150 Program
- The OBRA Waiver

Receiving Participant Service Plans

When the CHC-MCO receives a transitioning Participant from another HCBS program, the Participant file will identify the program the Participant is transitioning from and indicate whether the Participant has a service plan. The service plan will be transmitted to the email account designated by the CHC-MCO.

The CHC-MCO will receive the Participant's current service plan from the IEB for the following programs upon confirmation of CHC enrollment:

- ODP County Base Services ("MRX")
- An ODP HCBS Waiver
- The Pennsylvania Department of Aging OPTIONS Program
- EPSDT

The CHC-MCO will receive the Participant's current service plan from OLTL for the following programs and identify the effective date of HCBS:

- The Act 150 Program
- The OBRA Waiver

If the CHC-MCO does not receive the service plan as indicated above, the CHC-MCO must contact the OLTL Enrollment Unit by email at ***Redacted due to internal information***. The subject of the email will be "Continuity of Care Plan needed" and the email will contain the Participant's Recipient Identification number and the name of the waiver they're transferring from.

Within two business days of the date the CHC-MCO receives the service plan, the CHC-MCO must initiate contact with the providers identified in the service plan from the transferring program to confirm continuation of service authorization and payment. CHC-MCOs must provide continuity of care and/or services to Participants in

accordance with the requirements of Office of Medical Assistance Program Bulletin # 99-03-13.

If the CHC-MCO cannot enter into an arrangement with the Participant's non-MA OPTIONS providers to become Medical Assistance (MA) providers, the CHC-MCO must provide comparable services through a participating MA provider to meet the Participant's needs and ensure the Participant does not experience a gap in services. Some Participants transitioning from OPTIONS may receive services through a consumer-directed model. Participants who are self-directing care through OPTIONS may need to temporarily receive services through an agency model upon transition to CHC. Participants will be able to resume self-direction of services under CHC as soon as they are enrolled with the CHC Vendor Fiscal/Employer Agent.

NEXT STEPS

1. Review this information with appropriate staff.
2. Contact the Bureau of Coordinated and Integrated Services if you have questions.